

Please type a plus sign (+) inside this box → 

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	Not yet known
Filing Date	Herewith
First Named Inventor	Scherff, William Louis
Group Art Unit	Not yet known
Examiner Name	Not yet known
Attorney Docket Number	714595.114

I hereby appoint:

- Practitioners at Customer Number  
**OR**  
 Practitioner(s) named below:

27128

Place Customer  
Number Bar Code  
Label here

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

- The above-mentioned Customer Number.

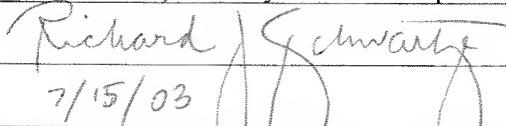
**OR**

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City		State	Zip
Country			
Telephone		Fax	

I am the:

- Applicant/Inventor.  
 Assignee of record of the entire interest. See 37 CFR 3.7.1.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	Richard J. Schwartz Vice President, Secretary and Chief Corporate Counsel
Signature	
Date	7/15/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 \*Total of 1 forms are submitted.